ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
|  |  |  |  |
| FEE DETERMINATION |  |  |  |
| O.I.P.E. CLASSIFIER |  | 6 | 10-3-01 |
| FORMALITY REVIEW |  |  |  |
| RESPONSE FORMALITY REVIEW |  |  |  |
|  |  |  |  |

## INDEX OF CLAIMS

✔ ............................... Rejected
= ............................... Allowed
— (Through numeral)... Canceled
÷ ............................... Restricted

N ............................... Non-elected
I ............................... Interference
A ............................... Appeal
O ............................... Objected

| Claim | | Date |
|---|---|---|
| Final | Original | |
| 1 | | 4/1/03 |
| 2 | | |
| 3 | | |
| ... | | |
| 50 | | |

| Claim | | Date |
|---|---|---|
| Final | Original | |
| 51 | | |
| ... | | |
| 100 | | |

| Claim | | Date |
|---|---|---|
| Final | Original | |
| 101 | | |
| ... | | |
| 150 | | |

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)